



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No: 09/638,285
Filing Date: August 14, 2000
Inventor(s):
Traversat, et al.

Atty. Dkt. No: 5181-42900
Examiner: Duong, Oanh L
Group/Art Unit: 2155

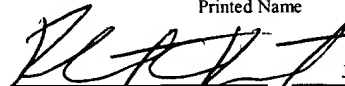
#8
LDT
7-15-04

Title: A System and Method of
Operating a Client Network
Computer in a Disconnected
Mode

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, Box RCE, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below.

Robert C. Kowert

Printed Name


Signature

June 2, 2004
Date

REQUEST FOR CONTINUED EXAMINATION

(under 37 CFR § 1.114)

RECEIVED

JUN 07 2004

This is a request for continued examination under 37 C.F.R. § 1.114 of application number 09/638,285, filed on August 14, 2000, entitled A System and Method of Operating a Client Network Computer in a Disconnected Mode.

Inventors(s): Traversat, et al.

Examiner: Duong, Oanh L

Group/Art Unit: 2155

Assignee: Sun Microsystems, Inc.

Recorded at Reel 011695, Frame 0281

Correspondence Address in Prior Application: Robert C. Kowert
Meyertons, Hood, Kivlin, Kowert, & Goetzel, P.C.
P.O. Box 398
Austin, Texas 78767-0398

Technology Center 2100

Application Elements

1. ☒ Filing Fee

The Commissioner is hereby authorized to charge the filing fees to Meyertons, Hood, Kivlin, Kowert, & Goetzel, P.C., Deposit Account No. 501505/5181-42900/RCK.

2. ☐ Information Disclosure Statement (IDS)

☐ Copies of IDS Citations

3. Amendments

☒ An amendment/submission is enclosed.

☐ Enter the unentered amendment previously filed on _____ under 37 C.F.R. § 1.116.

☐ Do NOT enter the unentered amendment previously filed on _____ under 37 C.F.R. § 1.116.

☐ Please consider the arguments in the response filed on _____ under 37 C.F.R. § 1.116.

☐ Please consider the arguments in the Appeal Brief or Reply Brief filed on _____.

4. ☐ Please enter the enclosed affidavits or declarations.

5. ☒ Return Receipt Postcard

6. ☒ If any extensions of time (under 37 C.F.R. § 1.136) are necessary to prevent the above referenced application(s) from becoming abandoned, Applicant(s) hereby petition for such extensions.

7. ☐ Other: _____

06/07/2004 MAHMED1 00000122 501505 09638285

01 FC:1801 770.00 DA

07/16/2004 LJOHN50N 00000000 1505 110.00 DA
01 FC:1251

☒ New Correspondence address

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The Commissioner is hereby authorized to charge any other fees which may be required or credit any overpayment to Meyertons, Hood, Kivlin, Kowert, & Goetzel, P.C., Deposit Account No. 501505/5181-42900/RCK.

Signature

Name

Registration No.

Date



Robert C. Kowert

39,255

June 2, 2004

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January - 03

09/638,285

RCE

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	minus 20 = *	
INDEPENDENT CLAIMS	minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 26 Minus	** 26	=
Independent	* 3 Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* Minus	**	=
Independent	* Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* Minus	**	=
Independent	* Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
	\$370	OR		\$450
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	770

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADITT. FEE		OR	TOTAL ADITT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADITT. FEE		OR	TOTAL ADITT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADITT. FEE		OR	TOTAL ADITT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.